

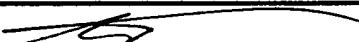
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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	09/475,945
		Filing Date	31 DECEMBER 1999
		First Named Inventor	PATRICK H. POTEZA
		Art Unit	2125
		Examiner Name	ZOILA E. CABRERA
Total Number of Pages in This Submission	181	Attorney Docket Number	

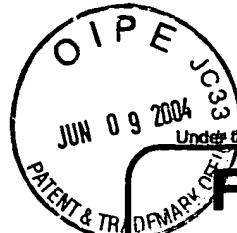
ENCLOSURES (Check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Applicant's Interview Summary with Attachments, Pwr of Atty Revocation, Postcard	Remarks
<b>RECEIVED</b> JUN 17 2004 Technology Center 2100			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	PATRICK H. POTEZA
Signature	
Date	9 JUNE 2004

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Typed or printed name	PATRICK H. POTEZA	
Signature		Date 9 JUNE 2004

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# FEE TRANSMITTAL

## for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1,427.00)

Complete if Known

Application Number	09/475,945
Filing Date	31 Dec 1999
First Named Inventor	Patrick H. Poteaga
Examiner Name	Zoila E. Cabrera
Art Unit	2125
Attorney Docket No.	

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## METHOD OF PAYMENT (check all that apply)

 Check  Credit card  Money Order  Other  None

 Deposit Account:

Deposit Account Number   
Deposit Account Name

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below  Credit any overpayments  
 Charge any additional fee(s) or any underpayment of fee(s)  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity	Fee Code (\$)	Fee	Small Entity	Fee Code (\$)	Fee Description	Fee Paid
1001	770	2001	385		Utility filing fee	
1002	340	2002	170		Design filing fee	
1003	530	2003	265		Plant filing fee	
1004	770	2004	385		Reissue filing fee	
1005	160	2005	80		Provisional filing fee	
SUBTOTAL (1) (\$)						

## 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Independent Claims	Multiple Dependent	Extra Claims below	Fee from below	Fee Paid
			-20* =	58 x 9 =	522
			- 3** =	10 x 4.3 =	43.00

Large Entity	Fee Code (\$)	Fee	Small Entity	Fee Code (\$)	Fee Description
1202	18	2202	9		Claims in excess of 20
1201	86	2201	43		Independent claims in excess of 3
1203	290	2203	145		Multiple dependent claim, if not paid
1204	86	2204	43		** Reissue independent claims over original patent
1205	18	2205	9		** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$)		952.00			

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

UN 17 2004

Technology Center 2100

## 3. ADDITIONAL FEES

Large Entity	Fee Code (\$)	Fee	Small Entity	Fee Code (\$)	Fee	Description	Fee Paid
1051	130	2051	65		Surcharge - late filing fee or oath		
1052	50	2052	25		Surcharge - late provisional filing fee or cover sheet		
1053	130	1053	130		Non-English specification		
1812	2,520	1812	2,520		For filing a request for ex parte reexamination		
1804	920*	1804	920*		Requesting publication of SIR prior to Examiner action		
1805	1,840*	1805	1,840*		Requesting publication of SIR after Examiner action		
1251	110	2251	55		Extension for reply within first month		
1252	420	2252	210		Extension for reply within second month		
1253	950	2253	475		Extension for reply within third month		
1254	1,480	2254	740		Extension for reply within fourth month		
1255	2,010	2255	1,005		Extension for reply within fifth month		
1401	330	2401	165		Notice of Appeal		
1402	330	2402	165		Filing a brief in support of an appeal		
1403	280	2403	145		Request for oral hearing		
1451	1,510	1451	1,510		Petition to institute a public use proceeding		
1452	110	2452	55		Petition to revive - unavoidable		
1453	1,330	2453	665		Petition to revive - unintentional		
1501	1,330	2501	665		Utility issue fee (or reissue)		
1502	480	2502	240		Design issue fee		
1503	640	2503	320		Plant issue fee		
1460	130	1460	130		Petitions to the Commissioner		
1807	50	1807	50		Processing fee under 37 CFR 1.17(q)		
1806	180	1806	180		Submission of Information Disclosure Stmt		
8021	40	8021	40		Recording each patent assignment per property (times number of properties)		
1809	770	2809	385		Filing a submission after final rejection (37 CFR 1.129(a))		
1810	770	2810	385		For each additional invention to be examined (37 CFR 1.129(b))		
1801	770	2801	385		Request for Continued Examination (RCE)		
1802	900	1802	900		Request for expedited examination of a design application		

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 475.00)

(Complete if applicable)					
Name (Print/Type)	Patrick H. Poteaga	Registration No. (Attorney/Agent)		Telephone	818 340-7268
Signature				Date	9 June 2004

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9 JUNE 2004  
(Date of Deposit)

PATRICK H. POTEZA

(Name of Applicant, Assignee or Registered Representative)



(Signature)

9 JUNE 2004

(Date)